

## WOUNDS AND BRUISES IN THE INSANE.

In a paper read before the Abernethian Society on this subject, Dr. T. Claye Shaw comes to the following conclusions:—

A correct estimate of the cause and life-history of a bruise is important.

1. To protect the interests of the patient.
2. To check unfounded charges of assault made against an attendant.
3. To ensure as far as possible the removal of causes which may have produced injuries and bruises in the past.

In view of the mental state of the patient the silent voice of the bruise is often the only guide there is, and even that is often not of much help, as it is rare to be able to surmise even the instrument which inflicted the injury, from a survey of the bruise.

From an analysis of 111 cases the following statistics have been collected:—

1. *Oncoming*.—89 per cent. of the bruises were apparent by the next day, and none appeared after three days.
2. *Coloration*:—
  - a* If bruise purple or red, injury inflicted within 4 days.
  - β* If bruise yellowish red or greenish yellow, injury inflicted 4-5 days ago.
  - γ* If bruise yellow, injury inflicted more than 4 days ago.
3. *Disappearance*:—
  - a* The time varied from 4-39 days.
  - β* 50 per cent. disappeared in 6-9 days.
  - γ* The influence of age, position, and bodily health could not be traced.

Where injury is due to external violence we usually have a superficial bruise, but—

1. In insane persons there is often a morbid condition of tissue, and internal injury may be done with no external bruise, often with very little violence.
2. Pathological processes, *e.g.*, purpura, may simulate bruising, and lead to the erroneous conclusion of violence.
3. Even in serious injuries, *e.g.*, broken ribs, broken jaw, ruptured muscle, not only may there be no external bruise, but the subjective symptom of pain is often wanting, due to the "insensitive" condition of the patient.
4. Deep injuries, especially with much blood extravasation, may cause delayed bruising and discoloration, due to absorption by superficial vessels.

An interesting analogy is drawn between the spectrum of white light and the colour changes in a bruise. The beam of white light may be said to be "bruised" in its passage through the prism. If a small quantity of blood is increasingly dilated we have a play of colours not unlike the succession in the spectrum—through red, greenish, yellowish-green, yellow, and final disappearance in excessive dilution. The parallel in a bruise consists in the extravasation and colouring, degeneration and dilution by surrounding fluids, which goes on till the colour, at first red or purple, fades through the lighter shades of yellow and finally disappears.